

CITY OF EL PASO, TEXAS
DEPARTMENT HEAD'S SUMMARY REQUEST FOR COUNCIL ACTION (RCA)

DEPARTMENT: Museum

AGENDA DATE: 03/01/05

CONTACT PERSON/PHONE: Museum, Becky Duval-Reese, (915) 532-1707

DISTRICT(S) AFFECTED: All

SUBJECT:

APPROVE: Staffing Table Change Request for Museum Development Coordinator

BACKGROUND / DISCUSSION:

This request is being made to trade an Educator for a Development Coordinator, who will assist in raising money For the History Museum.

PRIOR COUNCIL ACTION:

N/A

AMOUNT AND SOURCE OF FUNDING:

Will be savings to budget of approximately \$4,300.
Fund Source: 56010252-01101-501000

BOARD / COMMISSION ACTION:

Enter appropriate comments or N/A

N/A

*****REQUIRED AUTHORIZATION*****

LEGAL: (if required) _____

FINANCE: (if required) _____

OTHER: _____

(Example: if RCA is initiated by Purchasing, client department should sign also)

Information copy to appropriate Deputy City Manager

APPROVED FOR AGENDA:

CITY MANAGER: _____

DATE: _____

DATE: 1/20/05

CITY OF EL PASO
STAFFING TABLE CHANGE REQUEST

Date sent to City Council: 3/10/05

INITIALS: JLB-1/16

DEPARTMENT NAME: MUSEUMS	(1) HR DEPARTMENT ID 56	(2) ATTACHED DOCUMENTATION <input type="checkbox"/> Description of Duties <input type="checkbox"/> Organization Chart	Date sent to Human Resources: REQUESTED EFFECTIVE DATE: 1/20/05
-----------------------------	----------------------------	---	---

A=add

D=delete (3) (4) (5)

(6)

ACTIONS (7)

*R/T/C = Regular, Temporary, Contract
*L/U = Classified, Unclassified

A/D	# OF POS	Max Head Count	Business Unit	ACCOUNT DESCRIPTION and ACCOUNT CODE Fin. Dept. ID-Fund-Fin. Loc. Proj. or Grnt. (00000000-00000-00000PorG0000)	Position Number(s)	JOB CODE	JOB CLASS TITLE	PLAN GRADE	R/T/C	I/U
A	1		COFEP	56010252-01101-501000		511800	MUSEUM DEVELOPMENT COORD.	PM 75	R	C
D	1		COFEP	56010252-01101-501000		512300	MUSEUM EDUCATION CURATOR	PM 77	R	C
			COFEP							
			COFEP							
			COFEP							
			COFEP							
			COFEP							
			COFEP							

(8) Purpose: ☐ Streamline ☐ Expanded Program ☐ New Program ☐ New Facility ☒ Other (Explain)

(9) STATEMENT OF NEED / CONSEQUENCES OF NOT APPROVING ACTION(S): To trade an Educator for a Development Coordinator, who will assist in raising money for the History Museum.

ANTICIPATED IMPACT ON:

(10) DEPARTMENT ORGANIZATION/OPERATIONS History Museum	(11) DEPARTMENT BUDGET Will be savings to budget
---	---

(12) DEPARTMENT HEAD SIGNATURE: <i>B. Reese</i>	DATE: 1-24-05	BUDGET CHANGE <input type="checkbox"/> Required <input type="checkbox"/> Attached	AMOUNT ADDITIONAL FUNDS
--	------------------	--	-------------------------

<input checked="" type="checkbox"/> Requested CC and CG is Appropriate <i>AL</i>	HUMAN RESOURCES DEPARTMENT RECOMMENDATION	
<input type="checkbox"/> Change Class To	COMMENTS	HUMAN RESOURCES DIRECTOR <i>[Signature]</i>
<input type="checkbox"/> Change Grade To		DATE 1/28/05

COMMENTS: OK Bertelli - savings approx. \$4,300.

RECOMMENDATION <input checked="" type="checkbox"/> Position(s) Recommended <input type="checkbox"/> Position(s) Not Recommended	CHIEF FINANCIAL OFFICER	CITY MANAGER <i>[Signature]</i>
---	-------------------------	------------------------------------

RECEIVED

FEB 15 2005

HUMAN RESOURCES DEPT.
ADMINISTRATION

DATE